2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Jan 21, 2003 8:00 am Secretary of State DOCUMENT # 733441 1. Entity Name 01-21-2003 90052 021 ****61.25 MARCO LUTHERAN CHURCH, INC. OF MARCO ISLAND Principal Place of Business Mailing Address 90006830 525 N COLLIER BLVD 525 N COLLIER BLVD MARCO ISLAND FL 34145 MARCO ISLAND FL 34145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-6561840 Zip Zip Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GREUSEL, JAMIE Street Address (P.O. Box Number is Ngt Acceptable) 364 BALI MARCO ISLAND FL 34145 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. † am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition **UHL, WILFRED** NAME NAME STREET ADDRESS 201 VINTAGE BAY DR #30 STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 34145 CITY-ST-ZIP DS ☐ Delete TITLE ☐ Change ☐ Addition rayner, Carol NAME STREET ADDRESS 381 WORTHINGTON STREET STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 34145 CITY-ST-ZIP Delete TITLE ☐ Change Addition HILBERT, KENNETH NAME 5000 ROYAL MARCO WAY #630 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 34145 CITY-ST-7IP TITI F Delete TITLE Change ☐ Addition FINNEGAN, TIMOTHY NAME NAME STREET ADDRESS 261 S. COLLIER BLVD #204 STREET ADDRESS CITY-ST-ZIP MARCO ISLAND FL 34145 CITY-ST-ZIP TITLE Delete TITLE ☐ Channe Addition S. BARFIELD DAULO NAME NAME STREET ADDRESS CITY-ST-ZIP MARCO ISLAMD. FL CITY-ST-ZIB

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I im an object of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my signature shall have the same legal effect as if made under oath; that I im an object of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my signature shall have the same legal effect as if made under oath; that I im an object of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my signature shall have the same legal effect as if made under oath; that I im an object of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my signature shall have the same legal effect as if made under oath; that I im an object of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature shall have the same legal effect as if my signature s changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change

☐ Addition

FILED

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